

REQUEST FOR EMERGENCY PERSONNEL

I. TO: PERSONNEL FROM: _____ DATE _____
Department

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| NATURE OF EMERGENCY: <input type="checkbox"/> to assist until vacancy filled <input type="checkbox"/> to assist on temporary special project <input type="checkbox"/> Other (Complete Comments Section for "Other" Category) | |
| Position title needed: _____ | Date and time needed: _____ |
| Duration needed: (not to exceed 60 working days) _____ | |
| REASON FOR NEEDING EMERGENCY PERSONNEL: _____ _____ | |
| PLEASE RECRUIT TEMPORARY EMPLOYEE FOR CITY PAYROLL | <input type="checkbox"/> yes <input type="checkbox"/> no |
| I AM REFERRING APPLICANT FOR THE POSITION | <input type="checkbox"/> yes <input type="checkbox"/> no |
| REQUEST USE OF TEMPORARY AGENCY TO SAVE TIME RECRUITING | <input type="checkbox"/> yes <input type="checkbox"/> no |
| SIGNED: _____ | |

II. TO: FINANCE DIRECTOR FROM: PERSONNEL DIRECTOR

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| <input type="checkbox"/> RECOMMEND APPROVAL IF FUNDS AVAILABLE <input type="checkbox"/> DO NOT RECOMMEND APPROVAL (See Comment) |
| COMMENT: _____ _____ |
| SIGNED: _____ |

III. TO: MAYOR FROM: FINANCE DIRECTOR

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|---|
| <input type="checkbox"/> RECOMMEND APPROVAL. FUNDS AVAILABLE <input type="checkbox"/> DO NOT RECOMMEND APPROVAL. (See Comment) |
| COMMENT: _____ _____ |
| SIGNED: _____ |

IV. TO: PERSONNEL DIRECTOR FROM: MAYOR

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|---|
| REQUEST <input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED (See Comment) |
| COMMENT: _____ |
| SIGNED: _____ MAYOR DATE |